

**THE CLEVELAND MUSEUM OF ART, May 4 to June 12, 1949**  
**THIRTY-FIRST ANNUAL EXHIBITION of work by Cleveland Artists and Craftsmen**

The Entrant agrees to maintain the price designated below for six months after closing date of exhibition.

Artist JAMES L. KOCOUR, M.D. (Please print plainly)

Telephone No. BR 5077 Address 3800 E. 55 ST. 4  
Zone No.

**Zone No.**

**Please Enclose Registration Fee of \$2.00 (Check or Money Order) With Entry Blank.**

Permission to print prices on labels granted unless declined here

Entry blanks must be filled out and returned to the Museum on or before April 5, those postmarked later than April 5 will not be accepted.

Entries must be delivered at the Museum between 9 A.M. and 5 P.M. from April 9 to April 16 (except Sunday).